

## 2005 Infection Control Update

*Home Health Aides & Home Attendants*

Satellite Conference  
Wednesday, January 12, 2005  
2:00-4:00 p.m. (Central Time)

Produced by the Alabama Department of Public Health  
Video Communications Division

## Faculty

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## Objectives

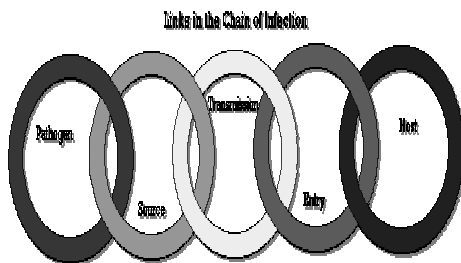
- Describe four of the six components of the chain of infection.
- Discuss the importance of using Standard Precautions to decrease job-related exposures to infectious diseases.
- Name three examples of bloodborne pathogens as defined in the Occupational Safety and Health administration's (OSHA's) Bloodborne Pathogens Standard.

## Objectives




- Demonstrate the proper procedure for donning and removing personal protective equipment.
- List the routes of transmission for hepatitis B and hepatitis C.

## Chain of Infection

Links in the Chain of Infection



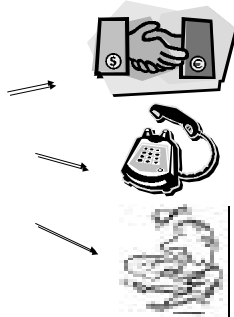
## For Infection to Occur An Organism Must:

- enter the body 
- grow and multiply 
- cause a response 

## Routes of Transmission

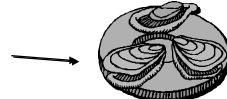
- **Contact:**

1. direct
2. indirect
3. droplet (3 feet)



## Routes of Transmission

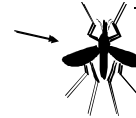
- **Vehicle**



- **Airborne**



- **Vector**

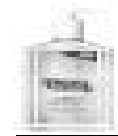
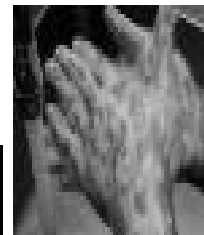


## Handwashing (Hand Hygiene)

- The **most important** measure you can use to prevent the spread of infection.



## CDC Hand Hygiene Guidelines



## Hand Hygiene

When hands are **visibly soiled** with blood or other body fluids:

- Wash hands with either a non-antimicrobial soap and water .....

OR

- An antimicrobial soap and water



## Hand Hygiene

If hands are **not visibly soiled**:

Use an alcohol-based hand rub for routinely decontaminating hands.



## Standard Precautions

- Consider all patients to be potentially infectious.
- Use appropriate barrier precautions at all times.



## Standard Precautions



## OSHA Bloodborne Pathogens Standard

Be knowledgeable about the three most common bloodborne pathogens encountered as a healthcare worker:

- Hepatitis B
- Hepatitis C
- HIV

## Transmission of Bloodborne Pathogens

Occurs when blood or body fluids from an infected person enters the body of a person who is not immune.

- 1) sexually
- 2) mother to newborn at birth
- 3) sharing hypodermic needles

## Occupational Transmission of Bloodborne Pathogens

- 1) Injuries involving needles or sharps
- 2) Mucous membrane exposures (eyes, nose, mouth)
- 3) Contact with non-intact skin

## Personal Protective Equipment (PPE)

- Use of PPE creates a barrier between the worker and the infectious material, thus improving personnel safety.
- Use of PPE plays a major role in improving safe work practices to decrease disease transmission.
- Healthcare workers should know when and how to use PPE.

### **Key Points About PPE**

1. Put on equipment before contact with patient.
2. Use equipment carefully – do not spread contamination.
3. Always remove and discard PPE carefully.
4. Immediately perform hand hygiene.
5. Clean re-usable goggles or safety glasses by washing with warm soapy water or wiping with alcohol.

### **Personal Protective Equipment**

#### **Wear Gloves:**

- When touching blood, body fluids, secretions, excretions;
- When touching mucous membranes and non-intact skin;
- When touching contaminated items.

### **Do's and Don'ts of Glove Use**

- Do work from “clean to dirty”.
- Don't touch your face or adjust PPE with contaminated gloves.
- Don't touch environmental surfaces except as necessary during patient care.

### **Do's and Don'ts of Glove Use**

- Do change gloves if torn or heavily soiled.
- Do change gloves when moving from one site of care to another site on the same patient.
- Never wash or reuse disposable gloves.
- Always discard in appropriate receptacle.

### **Personal Protective Equipment (PPE)**

- **Wear Apron:**  
With every patient. The apron worn over your uniform provides a basic barrier to protect you and also to protect your patient.

### **Personal Protective Equipment (PPE)**

- **Wear Gown:**  
During patient-care activities when you anticipate your uniform and apron may have contact with blood or body fluids.

## Personal Protective Equipment (PPE)

- Wear Mask and/or Eye Protection:  
During patient-care activities likely to generate splashes or sprays of blood, body fluids, or secretions.

## Facial Protection

- Masks/Facial Shields
  - Should protect nose and mouth.
  - Should fully cover nose and mouth and prevent fluid penetration.
- Goggles or Safety Glasses
  - Should fit snugly over and around eyes or eyeglasses.
  - Personal glasses are not a substitute for goggles.

## Sequence for Putting On and Removing Personal Protective Equipment

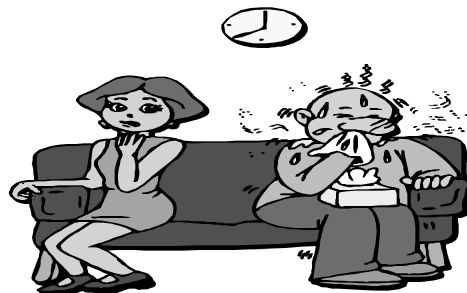
<u>Putting On PPE:</u>	<u>Removing PPE:</u>
1. Gown	1. Gloves
2. Mask	2. Goggles
3. Goggles	3. Gown
4. Gloves	4. Mask

## Demonstration of Proper Way to Put On and Remove Personal Protective Equipment (PPE)

## PPE Safe Work Practices- Always Remember To:

- Keep hands away from face.
- Limit surfaces touched.
- Change equipment when torn or heavily contaminated.
- Perform hand hygiene immediately after removing all PPE.

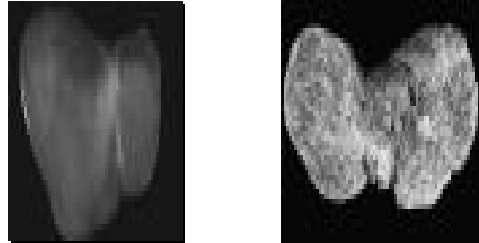
## Respiratory Hygiene



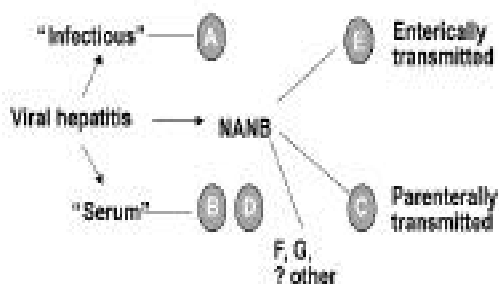
## Respiratory Hygiene

- Cover the nose and mouth when coughing or sneezing;
- Use tissues to contain respiratory secretions and dispose of in the nearest waste receptacle;
- Perform hand hygiene after having contact with respiratory secretions and contaminated objects/materials.

## Viral Hepatitis Hepatitis: Inflammation of the Liver



## Viral Hepatitis - Historical Perspective



## Viral Hepatitis: Signs and Symptoms

- Jaundice
- Dark urine
- Pale colored stools
- "Flu-like" symptoms
- Pruritus (generalized itching)
- Anorexia

## Hepatitis A Virus Transmission

- Close personal contact- fecal/oral route (household, sexual, daycare)
- Contaminated food, water (infected food handlers, raw seafood)
- Blood exposure (rare) (injecting drug use, transfusion)

## Hepatitis A Vaccine

- Present vaccine is 99% efficacious.
- A 2-dose schedule regime (given 1 month apart).
- Recommended for children 2 yrs. or older, homosexual and bisexual men, IV drug users, and travelers to endemic countries.

### **Hepatitis B Virus: Modes of Transmission**

- Sexual
- Parenteral
- Perinatal
- Other

### **Hepatitis B Virus: Concentration in Various Body Fluids**

High	Moderate	Low/Not Detectable
Blood	Semen	Urine
Serum	Vaginal fluid	Feces
Wound exudates	Saliva	Sweat
		Tears
		Breast milk

### **Hepatitis B Chronic Infection**

- Approximately 30-60% of young children and 2-10% of adults who are infected with HBV will develop chronic infection.
- Persons with chronic HBV infection are often asymptomatic.
- Approximately 15-25% of these may die prematurely from either cirrhosis or liver cancer.

### **Hepatitis B Vaccine**

- Vaccine is a recombinant vaccine-yeast derived product (not serum)
- 96% efficacious
- 3-dose regime, given IM in the deltoid:  
(0, 3, & 6 months intervals)

### **Hepatitis C: “THE SILENT EPIDEMIC”**

- The major healthcare problem worldwide.
- Many people who are infected do not have symptoms for many years, but their blood and body fluids could be infectious to others.

### **HEPATITIS C: “THE SILENT EPIDEMIC”**

- 50 million people infected worldwide; of these, 4 million are in the U.S.
- 70-90% of those infected will develop chronic infection.
- Contributes to over 12,000 deaths annually.

### **Hepatitis C Transmission**

- Injecting drugs
- Sexually
- Blood transfusions (prior to blood donation screening)
- Perinatally
- Household (sharing razors, toothbrushes, etc.)
- Other

### **Hepatitis C Treatment?**

- There is no vaccine for hepatitis C.
- There are some anti-viral medications available for treatment of certain hepatitis C patients, but treatment is usually only effective in 10-40% of those treated.

### **Hepatitis D**

Hepatitis D infection is acquired either:

- As a co-infection with hepatitis B
- OR
- As a superinfection of persons with chronic hepatitis B infection

### **Hepatitis D Virus: Modes of Transmission**

- 1) Percutaneous exposures
  - Injecting drug use
  - Accidental needlesticks
- 2) Permucosal
- 3) Sexual transmission
- 4) Perinatal

### **Hepatitis D Prevention**

- No vaccine available.
- Individuals with chronic hepatitis B should be educated regarding the need to reduce any risk factors they may have for acquiring hepatitis D.

### **Hepatitis E Virus**

- The major etiologic agent of enterically transmitted non-A, non-B hepatitis worldwide.
- Case fatality rate for pregnant women is 15-25%.
- No vaccine available.



## Infection Prevention



Lend Healthcare A Hand  
By Washing Yours™

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